Influenza Surveillance Report

Division of Epidemiology - Disease Surveillance and Investigation

District of Columbia Department of Health

2018-2019 Influenza Season Week 1 (December 30, 2018 – January 5, 2019)

(All data are preliminary and may change as more reports are received)

SUMMARY

- 47 new cases of influenza were reported by hospitals
- Zero pediatric deaths were reported
- To date, 210 influenza cases have been reported for the 2018-2019 influenza season
- DC Public Health Laboratory did not report any specimens tested for week 1
- Flu activity continues to remain low in the District

INFLUENZA SURVEILLANCE FROM DC HOSPITALS & AMBULATORY CARE FACILITIES

District of Columbia (DC) hospitals report detailed information on cases of influenza on a regular basis. In accordance with CDC guidelines, influenza-associated deaths in cases <18 years of age and novel influenza A infections are notifiable diseases. In addition to this, the DC Department of Health (DC Health) requests that influenza hospitalizations be reported whenever possible.

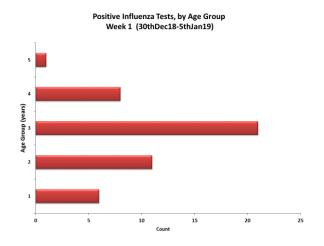
The table below summarizes weekly and cumulative cases of influenza for the 2018-2019 Season. Data are also presented by age group and by number of cases reported weekly. During week 1 (December 30th, 2018 – January 5th, 2019), there were 47 new cases of influenza reported. A total of 710 tests were performed during week 1. To date, there are 210 positive influenza cases reported by all nine hospitals in DC.

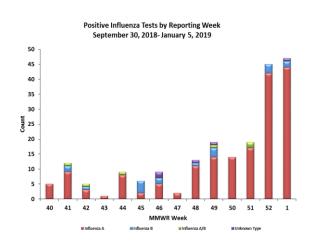
Surveillance of Influenza Cases Reported By Influenza Type

	Week 1 (Dec 30, 2018- Jan 5,2019)		Cumulative Positive Cases for Weeks 40–20 (September 30, 2018–May 18, 2019)		
Influenza A	44	(93.34%)	181	(86.20%)	
Influenza B	2	(6.66%)	15	(7.14%)	
Influenza A/B	0	(0.00%)	9	(4.28%)	
Influenza (not typed)	1	(0.00%)	5	(2.38%)	
Total	47*	(100.00%)	210*	(100.00%)	

^{*}Includes results from Rapid Diagnostic Testing, Viral Culture, RT-PCR, Serology, and Immunofluorescence.

^{**}Age groups are classified as 1(0-4 years), 2 (5-24 years), 3(25-64 years), 4 (>64 years) & 5 (age not specified)





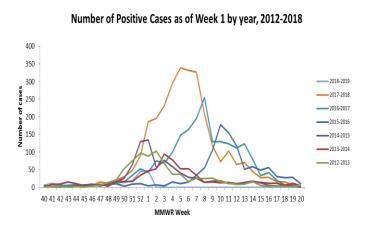
RAPID DIAGNOSTIC TESTING

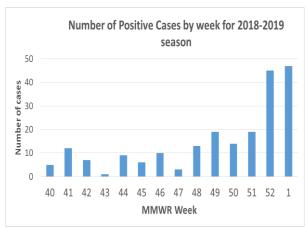
Rapid Diagnostic Tests are point-of-care screening tests used to detect influenza virus. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the influenza season progresses. During week 1, 333 out of a total of 710 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 24 (7.20%) were identified as positive using rapid diagnostics.

Week: 1 (December 30, 2018 – January 5, 2019)					
No. of specimens tested Rapid Diagnostics	333				
No. of positive specimens (%)	24 (7.20%)				
Positive specimens by type/subtype					
Influenza A	21(87.50%)				
Influenza B	2 (8.34%)				
Influenza A/B	1 (4.16%)				
Influenza – unknown type	0 (0.00%)				

WEEK 1 COMPARISON WITH PREVIOUS SEASONS

For week 1, there were 47 new influenza cases reported in the current season, 186 in the previous 2017-2018 season, 43 cases in the 2016-2017 season, 4 cases in the 2015-2016 season, 134 in the 2014-2015 season, 47 in 2013-2014 and 88 in the 2012-2013 season.





Cumulatively, there are a total of 210 cases reported up to week 1 for the current season. For the previous seasons, 428 cases were reported during the 2017-2018 season, 212 during the 2016-2017 season, 71 in the 2015-2016 season, 405 in the 2014-2015 season, 191 in 2013-2014 season and 365 in the 2012-2013 season.

INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE

Sentinel surveillance for ILI consists of four outpatient reporting sites for the District of Columbia. The sentinel surveillance sites report the total number of ILI cases encountered per week and the total number of patients seen at the clinic during that same week. For this system, ILI is defined as the existence of fever (temperature of 100°F

[37.8°C] or greater) and a cough and/or a sore throat in the absence of a known cause other than influenza.

For week 1, sentinel providers reported 302 out of 11643 visits (1.72%) that met the criteria for ILI.

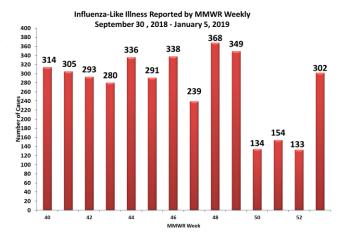
Geographic Spread of Influenza for Washington, DC

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	Week of			Activity *		
	Dec 30 - Jan 05	Sp	ooradic			

*No Activity – overall clinical activity remains low and there are no lab confirmed Influenza cases;

Sporadic – isolated lab confirmed Influenza cases reported and ILI activity is not increased;

Local – increased ILI activity and recent lab confirmed Influenza cases. As the District of Columbia is not a state, this is the highest level of ILI activity it can report.



INFLUENZA TESTING BY THE DISTRICT OF COLUMBIA PUBLIC HEALTH LABORATORY (DC PHL)

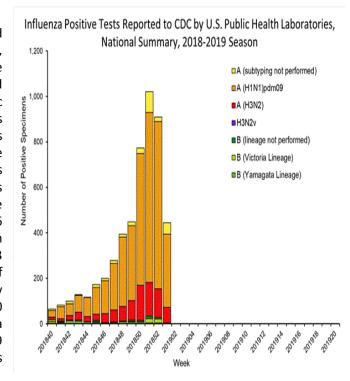
The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to DC PHL by hospitals and commercial laboratories on a regular basis. The DC PHL did not report any specimens tested for week 1. For the 2018-2019 season, PHL has completed testing for 434 specimens.

DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype*

DC PHL Influenza Testing	Dec 30, 2018 – Jan 05, 2019	Sep 30, 2018 –Jan 05, 2019		
Number of specimens tested	0	434		
Number of positive specimens	0	9		
Influenza A	0(0.0%)	9 (100.0%)		
A(H1N1)pdm09	0	8		
H3N2	0	1		
Influenza B	0 (0.00%)	0 (0.00%)		
Yamagata lineage	0	0		
Victoria lineage	0	0		

NATIONAL INFLUENZA ASSESSMENT

Influenza activity remains elevated in the United States. Influenza A (H1N1) pdm09, Influenza A (H3N2), and influenza B viruses continue to co-circulate. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. Three influenza-associated pediatric deaths were reported to CDC during week 1. One death was associated with influenza A (H1N1) pdm09 viruses, one death was associated with an influenza A (H3) virus and one death was associated with an influenza A virus for which no subtyping was performed. All three deaths occurred during weeks 52. A total of 16 influenza-associated pediatric deaths have been reported for the 2018-2019 season. During week 1, 833 specimens were tested by public health laboratories, of which 444 were positive. Of the 444 respiratory specimens that tested positive during week 1, 440 (99.1%) were Influenza A and 4 (0.9%) were Influenza B. Of the Influenza A samples, 322 (82.6%) were 2009 H1N1, 68 (17.4%) were H3N2, and no subtyping was performed for 50 specimens.





Get Vaccinated!

To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at https://dchealth.dc.gov/service/immunization

For additional information about Influenza and Influenza activity in the United States, please visit: http://www.cdc.gov/flu/index.htm. Questions about Influenza in the District of Columbia or this report should be directed to the Division of Epidemiology - Disease Surveillance and Investigation at (202) 442-9370 or email flu.epi@dc.gov